## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying		
			D	apers. Each additional	paper, such as an assignme of mailing or transmission.	ent or formal drawing, must
22204 75		2006.		Certi	ificate of Mailing or Trans	mission
NIXON PEABODY, LLP 401 9TH STREET, NW SUITE 900				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
WASHINGTON, I	OC 20004-2128					(Depositor's name)
					·	(Signature)
			L			(Date)
APPLICATION NO. FILING DATE		FIRST NAMED INVENT		OR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/662,358 09/15/2000		Taiji Noda		0819-0423	1724	
TITLE OF INVENTION: SI	EMICONDUCTOR D	EVICE AND METHOD	FOR FABRICATING	ГНЕ SAME		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0		\$1400	04/17/2006
EXAMINE	ER	ART UNIT	CLASS-SUBCLASS			
MAI, ANI	ł D	2814	438-276000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN MATSUSHITA ELECT	CC		data will appear on the off a substitute for filing (B) RESIDENCE: (CI			document has been filed for
Please check the appropriate	assignee category or	categories (will not be p	rinted on the patent):	☐ Individual ☐ Co	rporation or other private gr	oup entity Government
4a. The following fee(s) are submitted:    Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Publication Fee (No small entity discount permitted)   Advance Order - # of Copies						eficiency, or credit any
5. Change in Entity Status  a. Applicant claims S	MALL ENTITY statu	s. See 37 CFR 1.27.		•	L ENTITY status. See 37 C	
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if requords of the United Sta	ired) will not be accepte tes Patent and Trademark	ed from anyone other that k Office.	n the applicant; a regis	stered attorney or agent; or t	the assignee or other party in
Authorized Signature			Date			
Typed or printed name						
This collection of informatic an application. Confidential submitting the completed at this form and/or suggestion. Box 1450, Alexandria, Virg Alexandria, Virginia 22313. Under the Paperwork Reduc	1430.					nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, ol number.
		<del></del>				192380
04/18/2006	00000165	5 <u>1</u> <u>15</u>	<u>01</u> \$1,400	).()()   1)4/1	7/2006 DA	172300